

## **VENDOR APPLICATION**

CITY OF ASHEVILLE PURCHASING DIVISION P.O. BOX 7148 ASHEVILLE, NC 28802 / #3 HUNT HILL PLACE, ASHEVILLE, NC 28801 PHONE (828) 259-5950 / FAX (828) 259-5440 / EMAIL purchasing@ashevillenc.gov

(Please return the first	(2) pages ONLY by	y email, fax or mail	Vendor No	umber (Purchasing to	o assign)	
COMPANY NAME						
DBA						
<b>PURCHASE ORDER</b>	R ADDRESS:					
Street or P.O. Box						
City		State		Zip Code		
Telephone		Fax		Email		
Federal Tax ID #		SS # ( If Individual)	Individual) Payment Terms			
Send Bid Requests	To: (If different	from purchase order a	ddress show	n above)		
Street or P.O. Box						
City		State		Zip Code		
Telephone			Email			
REMIT ADDRESS:		Fax				
Street or P.O. Box						
City		State	Zip Code			
Telephone		Fax		Email		
SALES REPRESEN	TATIVE(S):					
Inside Sales	Name		Phone			
Outside Sales	Name			Phone		
NAME OF INDIVIDU	ALS WITH AUT	HORITY TO QUOTE AN	D/OR SIGN C	ONTRACTS		
NAM	E	TITLE	TITLE PHONI		ONE	
CITY OF ASHEVILLE	PRIVILEGE LICEI	NSE[]YES[]NO(	Privilege Licen	se copy must be pr	ovided)	
<b>OUT OF STATE VEND</b>	ORS -NC CERTIF	ICATE OF AUTHORITY NO	).			
TYPE OF BUSINE	SS: (Describe	your business here)				
CORPORATION	[ ]	PARTNERSHIP	[ ]	INDIVIDUAL	[	1
DATE ESTABLISHE	D/FOUNDED	-		-		
		RTNERS, OR MEMBERS	S OF FIRM AN	D TITLE		
NAME		TITLE				
NAME		TITLE				
NAME		TITLE				
	TIME OR AT AI	NY TIME DURING THE I	AST 12 MON	THS HAS ANY O	WNER OFF	ICER
	,	R OTHER PERSON V		,	,	,
		MPANY BEEN CONNE		,		
		OF ASHEVILLE [				
	, <b></b>	J. 7.071271222 [	, .= <del>.</del> .	,		

LIST THREE (3) SUPPLIERS TO Y		
NAME	ADDRESS	PHONE
IST THREE (3) COMPANIES TO	WHOM YOU FURNISH PRODUCT	S OR SERVICE:
NAME	ADDRESS	PHONE
*****	**********	*****
ATTEN	ITION MINORITY / WOMAN OWNE	ED BUSINESS
LL MINORITY OWNED BUSINES	SSES ARE REQUESTED TO COMP	LETE THE FOLLOWING IN THE
	S THEIR BUSINESS. PLEASE CHE	
he City of Asheville, in a concerte	d effort with other local, state and fe	deral agencies, actively seeks to identify
		as providers of goods and services to the
		is 51% owned and controlled by ethnic
		isiness and are not currently certified wit
		ordinator, by calling (828) 232-4566. Fo
nore information on the Minority B		
	daniesa i rogiam, go to www./tsnew	ileNC.gov.
	domess i rogiam, go to www./tonevi	ileivo.gov.
[ ] African American [ ] Native		•
	American [ ] Hispanic American [	] Asian American [ ] Woman Owned
I CERTIFY THAT THE INFORMATION	American [ ] Hispanic American [	] Asian American [ ] Woman Owned
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## ENTER THE 3-5 DIGIT COMMODITY CODE CLASSIFICATION FOR EACH PRODUCT OR SERVICE YOUR COMPANY CAN PROVIDE IN THE BLOCKS BELOW FROM THE COMMODITY LIST.

| Commodity |
|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|
| Code      |

If a commodity code cannot be identified from the list of commodities or your company is not defined under Type of Business, please provide additional information below.